## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective Octob r 1, 2001

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |              |             |                                 |                  |       | SMALL ENTITY TYPE   |                        | OR    | OTHER<br>SMALL      |                        |
|---|--|---|--------------|-------------|---------------------------------|------------------|-------|---------------------|------------------------|-------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | 7            |             |                                 |                  |       | RATE                | FEE                    |       | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED |             | NUMBER EXTRA                    |                  |       | BASIC FEE           | 370.00                 | OR    | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 17 minus 20= |             | • 🗸                             |                  |       | X\$ 9=              |                        | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =    |             |                                 |                  |       | X42=                |                        | OR    | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |              |             |                                 |                  |       | +140=               |                        | OR    | +280=               |                        |
| * If the diff rence in column 1 is less than zero, enter "0" in column 2  |  |   |              |             |                                 |                  | TOTAL |                     | OR                     | TOTAL |                     |                        |
| 7 14 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |              |             |                                 |                  | Ĺ     | SMALL E             | NTITY                  | OR    | OTHER<br>SMALL      |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | PREVI       | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | • 23                                      | Minus        | **          | 20                              | <b>.</b> 3       |       | X\$ 9=              |                        | OR    | <b>x\$</b> €        | 150                    |
|   | Independent                                    | · 4                                       | Minus        | ***         | 4.                              | -                |       | X42=                |                        | OR    | 250<br><b>X83</b> = |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |             |                                 |                  | J     | +140=.              | _                      | OR    | +280=               |                        |
|   |  |   |              |             |                                 |                  |       | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL ADDIT. FEE    | PU                     |
| (Column 1) (Column 2) (Column 3)  |  |   |              |             |                                 |                  |       |                     |                        |       |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREV | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **          |                                 | -                | 7     | X\$ 9=              |                        | OR    | X\$18=              |                        |
|   | Independent                                    | •   | Minus        | ***         | - ()-,1                         | -                | ]     | X42=                |                        | OR    | X84=                |                        |
| _   | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEI  | PENDEN      | T CLAIM                         |                  | 1     | +140=               |                        | OR    | +280=               |                        |
|   |  |   |              |             |                                 |                  |       | TOTAL               |                        | OR    | TOTAL               |                        |
|   |  |   |              |             |                                 |                  |       | ADDIT. FEE          |                        | UN    | ADDIT. FEE          |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST   |  |   |              |             |                                 |                  |       |                     |                        |       |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUI<br>PREV | MBER<br>TOUSLY<br>D FOR         | PRESENT<br>EXTRA |       | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus        | **          |                                 | -                |       | X\$ 9=              |                        | OR    | X\$18=              |                        |
| ME  | Independent                                    | •   | Minus        | ***         |                                 | a.               | 1     | X42=                |                        | OR    | X84=                |                        |
| 5   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |             |                                 |                  | J     |                     |                        |       |                     |                        |
| to 16 the centre in column 4 is less than the pater in anhuma 2 units 90° in column 2   |  |   |              |             |                                 |                  |       | +140=               |                        | OR    | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE                          |  |   |              |             |                                 |                  |       |                     |                        | OR    | TOTAL<br>ADDIT. FEE |                        |
| ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |             |                                 |                  |       |                     |                        |       |                     |                        |

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